

FAX TRANSMISSION**RECEIVED
CENTRAL FAX CENTER****AUG 30 2006****DATE:** August 30, 2006**PTO IDENTIFIER:** Application Number 10/613,002-Conf. #4485
Patent Number**Inventor:** Manfred Hoppe et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** CONNOLLY BOVE LODGE & HUTZ LLP
Ashley I. Pezzner**PHONE:** (302) 658-9141**Attorney Dkt. #:** 05579-00304-US**PAGES (Including Cover Sheet):** 5**CONTENTS:** Certificate of Transmission (1 pg)
Transmittal (1 pg.)
Submission of Reissue Declaration (1 pg.)
Supplemental Declaration for Reissue Patent Application to Correct "Errors" Statement (1 pg.)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (302) 658-9141 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

CONNOLLY BOVE LODGE & HUTZ LLP
1007 North Orange Street, P.O. Box 2207, Wilmington, Delaware 19899
Telephone: (302) 658-9141 Facsimile: (302) 658-6614

AUG. 30. 2006 3:44PM

RECEIVED
CENTRAL FAX CENTER

NO. 2940 P. 2

AUG 30 2006

PTO/SB/97 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.


Application No. (if known): 10/613,002

Attorney Docket No.: 05579-00304-US

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on August 30, 2006
Date



Signature

Yvonne C. Steiner
Typed or printed name of person signing Certificate

Registration Number, if applicable

(302) 884-6598
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Transmittal (1 pg.)
Submission of Reissue Declaration (1 pg.)
Supplemental Declaration for Reissue Patent Application to Correct
"Errors" Statement (1 pg.)

484914_1

PTO/SB/21 (08-04)

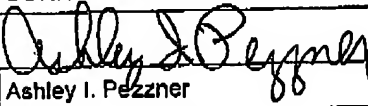
Approved for use through 07/31/2008. OMB 0851-0031

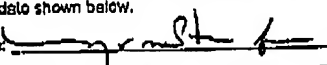
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	10/813,002-Conf. #4485
	Filing Date	July 2, 2003
	First Named Inventor	Manfred Hoppe
	Art Unit	1714
	Examiner Name	P. D. Niland
	Attorney Docket Number	05579-00304-US
Total Number of Pages in This Submission		

RECEIVED
CENTRAL FAX CENTER
AUG 30 2006

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Submission of Reissue Declaration Supplemental Declaration for Reissue patent Application to Correct "Errors" Statement
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	CONNOLLY BOVE LODGE & HUTZ LLP	
Signature		
Printed name	Ashley I. Pezzner	
Date	August 30, 2006	Reg. No. 35,646

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-6300, on the date shown below.	
Dated: 8-30-06	Signature:  (Ashley I. Pezzner)

Application No. 10/613002
Reply to Office Action of April 20, 2006

Docket No.: 05579-00304-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Manfred Hoppe et al.

RECEIVED
CENTRAL FAX CENTER
AUG 30 2006

Application No.: 10/613002

Confirmation No.: 4485

Filed: July 2, 2003

Art Unit: 1714

For: DISPERSE AZO DYE MIXTURES

Examiner: P. D. Niland

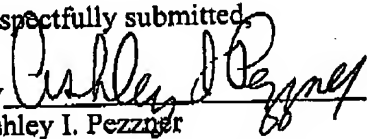
SUBMISSION OF REISSUE DECLARATION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The applicant has enclosed an executed reissue declaration. Applicant believes no fee is due with this response. However, if a fee is due, please charge our Deposit Account No. 03-2775, under Order No. 05579-00304-US from which the undersigned is authorized to draw.

Respectfully submitted,

By 
Ashley I. Pezzner

Registration No.: 35,646
CONNOLLY BOVE LODGE & HUTZ LLP
1007 North Orange Street
P.O. Box 2207
Wilmington, Delaware 19899
(302) 658-9141
(302) 658-5614 (Fax)
Attorney for Applicant